

McLaren - Flint  
OB/GYN  
PRE-DELIVERY ORDERS

ADMIT TO Inpatient Status:

ADMIT TO The OB/GYN Service \_\_\_\_\_

ADMITTING PHYSICIAN: \_\_\_\_\_

DIAGNOSIS:  Active Labor  Induction for: \_\_\_\_\_

For induction only, indicate:  Active Management OR  Routine Management

Allergies: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

1. ACTIVITY: Ambulate PRN

2. DIET: NPO except ice chips when in active labor  Clear Liquid  Diet as tolerated

3. VITAL SIGNS: Per Protocol

4. LABS:  CBC  HB<sub>s</sub>Ag screen if prenatal results unavailable

ABO / Rh  Urine Drug screen

RPR

Other: \_\_\_\_\_

5. CONSULTS:  Notify Neonatology if particulate meconium stained fluid / Cesarean Section.

Call attending physician for epidural

6. FETAL MONITORING:  Continuous

Intermittent

Doppler

7. MEDICATIONS INCLUDING IV'S: Administer **if not allergic**:

• **IV Therapy**

LR at 125 ml/hr.

Titrate IV rate in accordance to patient needs

If IV is present during the delivery, hang new bag with 10 units of Oxytocin (PITOCIN) in 500mL LR after delivery of the placenta, run at 125 mL/hr times one bag.

• If Group B strep is positive and the patient is in Active Labor OR the membranes have been ruptured for greater than 18 hours administer:

Select One

Ampicillin 2 grams IVPB now and then 1 gram every 4 hours until delivery

Clindamycin (CLEOCIN) 900 mg now and every 8 hours until delivery

Penicillin G 5 million units IVPB and then 2.5 million units every 4 hrs until delivery.

• **Other Medications:**

Butorphanol (STADOL) 1 mg IV push every 2 hours as needed for pain if fetal heart tones are reactive

Dinoprostone (CERVIDIL) - NEED TO INDICATE DOSE, ROUTE AND FREQUENCY \_\_\_\_\_

(Indicate route and frequency)

Prostaglandin Gel -  2.5 mL or  5 mL \_\_\_\_\_ (Indicate route and frequency)

Bicitra 30 mL by mouth 30 minutes Pre-op

\_\_\_\_\_  
Physician / Midwife

\_\_\_\_\_  
Date (required)

\_\_\_\_\_  
Time (required)



PT.

MR.#/P

DR.